

HCSIS Alert!

Department of
Mental Retardation

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The last HCSIS and Meditech implementation is coming up in the Metro Region and for Fernald and Hogan Facilities. July 17, 2006 marks the culmination of many years work and many peoples' efforts. Thanks to you all and Congratulations!

Contact Hans H. Toegel at:
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Hans.H.Toegel@state.ma.us
with questions.

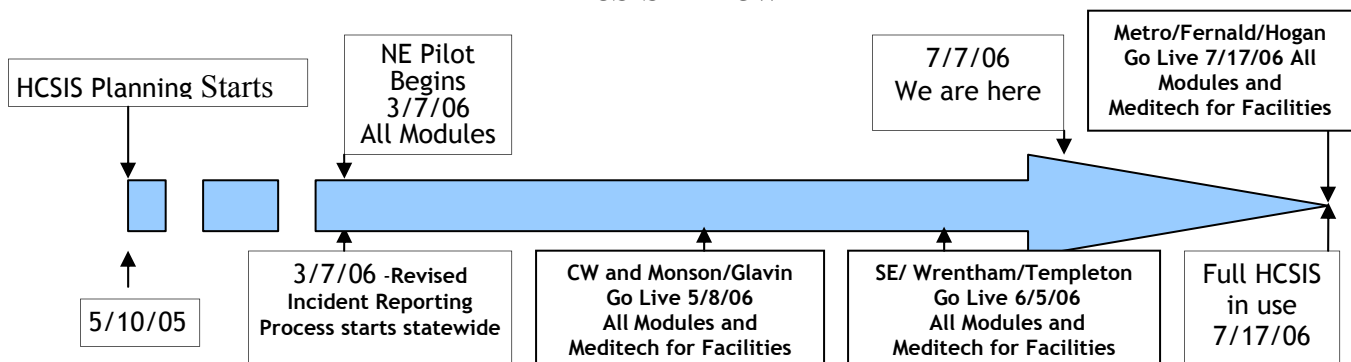
As of noon on 7/6/06, Southeast Region recorded the following in HCSIS since 6/5/06:

	<u>SOUTHEAST</u>	<u>WRENTHAM</u>	<u>TEMPLETON</u>
◇ Incidents	388	18	11
◇ Restraints	50	1	55
◇ Medication Occurrences	119		
◇ Health Care Records	104		

POST-LIVE COMMUNICATION: As each region and facility goes live, we have created a communication network for DMR staff, Facility Staff and Provider staff that permits consistent routing of problems and resolutions. To date, the Northeast, CentralWest and the Southeast DMR regions have had regular conference calls among their areas and also with providers. During the live support period for the region (the three weeks following go-live), we have been encouraging providers to contact their Area contact or Regional contact with issues as they arise and those people route the problem through the appropriate channels at DMR. We use the same mechanism, but in reverse, once a resolution is found. This enables DMR to get a handle on what types of issues persist or exist and helps to prepare our Help Desk for handling provider calls once the live-support period ends. At that time, we would expect DMR to use their internal resources first to try to resolve problems and then access the DMR help desk with unresolved issues. Providers should feel free to contact the DMR Help Desk for HCSIS-related questions. Access-related questions should be directed to the Virtual Gateway Help Desk.

ON-GOING BUSINESS ISSUES: DMR is creating a group to function as a clearinghouse for HCSIS business process issues. That group will be represented by the DMR regional contacts for the HCSIS implementations and facility contacts as well. Connie Lehr will form the group and begin to structure its activities. In this way we can be sure that we maximize consistency and messages back to users about the business decisions that should be made and followed in HCSIS. Eventually, we plan to see an integrated DMRIS group operated through the DMR Business Analysts to address both HCSIS and Meditech issues.

HCSIS ARROW



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A WORD ABOUT CONSISTENCY: If you are experiencing different instructions from different Area Offices or Regions, please contact your Regional Implementation Lead Person. That person can either resolve the issue or bring it to a statewide group to discuss inconsistency and standardization of processes and messages.

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ABOUT RESTRAINT FORMS AND BEHAVIOR PLANS:

If a clinician includes in a behavior plan a 'recommended' method of restraint that is effective for a particular individual, or details in a behavior plan circumstances which amount to an emergency for this individual, the recommended restraint is not part of the behavior plan. Because the restraint will only be applied if an emergency exists, it must comply with the restraint regulations and be documented on a restraint form. Even if a restraint is written into a behavior plan due to a possibility that implementation of the behavior plan may result in an emergency, the recommended restraint is not part of the behavior plan, but is subject to restraint regulations, requiring a restraint form. If a clinician establishes a specific treatment purpose for the hold in a behavior modification plan, such as an escort to time out, etc., then the hold does not have to be reported under the emergency restraint regulations.

Thanks to Rich Salandrea and Tom Anzer for this clarification.

MORE ABOUT ENHANCED SECURITY:

DMR is in the process of analyzing feedback from the provider surveys about Enhanced Security to determine the best approach to Pilot and roll-out this module. Pilot will be limited to a small number of providers and roll-out will probably be staggered to accommodate the need to build new additional users in the Virtual Gateway. Stay tuned for additional details but the module should be piloted during the summer months with roll-out to follow.

CLARIFICATION: The following language appears in Alert #15:

OTHER NEWS:

➤ Health Care Records - Only people with a DMR ISP living in a Nursing Facility receive a Health Care Record. For all individuals in Nursing Facilities and DMR Facilities about to leave for the Community, a Health Care Record is completed.

This was not meant to imply that these are the only individuals for whom a Health Care Record should be created. This was meant to clarify the status of individuals in Nursing Facilities. Please contact your Area Office if you have any questions.

REMEMBER:

1. Share this Alert! with other people in your organization - Perhaps at staff meetings
2. Call Hans (617) 624-7781 or email at Hans.H.Toegel@state.ma.us with questions
3. Virtual Gateway Help Desk 1-800-421-0938
4. DMR Help Desk 1-866-327-8163